

**Town, City, Village, State or Federal
Permits May Also Be Required**

LAND USE - X
SANITARY - 22-108S
SIGN -
SPECIAL - NA
CONDITIONAL -
BOA -

BAYFIELD COUNTY

PERMIT

**WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION**

No: 07062202-2022

Tax ID: 7107

Issued To: MICHAEL M & SUSAN MICEVYCH
TRUSTEES

Location: BAYVIEW BEACH ASSESSOR'S Section 05
PLAT IN GOVT LOTS 2, 3 & 4 - SEC.
5-49-4 LOT 9 BLOCKS 2 & 3 PAR IN
GOVT LOT 3 IN DOC 2019R-580264
(MICHAEL M MICEVYCH REV TRUST
AND E MICEVYCH FAMILY TRUST)

Township 49 N.

Range 04 W.

BAYVIEW

Govt Lot 0

Lot

Block

Subdivision: BAYVIEW CSM#
BEACH ASSESSORS PLAT

For: Residential / Residence / 38L x 49W x 24H, Porch: 18L x 12W x20H, Garage: 28L x 24W x20H, Porch: 26L x 12W x0H

Condition(s): To replace current residence and garage. To meet all setbacks, including eaves and overhangs. For personal residence only. Town/State/DNR permits may be needed. Must obtain a Uniform Dwelling Code (UDC) permit from locally contracted UDC inspection agency prior to start of construction.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented,

Erica Meulemans

Authorized Issuing Official

Fri Sep 16 2022

(Disclaimer): Any future expansions or development requires additional permitting

erroneous, or incomplete.

Date

This permit may be void or revoked if any performance conditions are not completed or if any conditions are violated.

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

RECEIVED
AUG 16 2022
Bayfield Co.
Planning and Zoning Agency

Permit #:	23-0246
Date:	9-14-22
Amount Paid:	210-9-14-22 dck
Other:	
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Original Application MUST be submitted FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT REQUESTED		<input type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY		<input type="checkbox"/> PRIVY		<input type="checkbox"/> CONDITIONAL USE		<input type="checkbox"/> SPECIAL USE		<input type="checkbox"/> B.O.A.		<input type="checkbox"/> OTHER	
Owner's Name: NEAL M. & LEEANN FREY				Mailing Address: 78765 WASHINGTON AVE				City/State/Zip: WASHBURN, WI 54891				Telephone: Cell Phone: 715 308.1400			
Address of Property: SAME				City/State/Zip: SAME											
Email: (print clearly) NMFREY.81@GMAIL.COM															
Contractor: SELF				Contractor Phone: 715.308.1400				Plumber: MIKE WRUBLEWSKI				Plumber Phone: 920 252 2528			
Authorized Agent: (Person Signing Application on behalf of Owner(s))				Agent Phone:				Agent Mailing Address (include City/State/Zip):				Written Authorization Required (for Agent)			
PROJECT LOCATION		Legal Description: (Use Tax Statement)		Tax ID# 36417 37490 58822		Recorded Document: (Showing Ownership) 2022R 593888									
NE 1/4, NW 1/4		Gov't Lot		Lot(s)		CSM		Vol & Page		CSM Doc #		Lot(s) #		Block #	
Section 20		Township 49		N, Range 4		W		Town of: BAYVIEW		Lot Size		Acreage 45			

<input type="checkbox"/> Shoreland	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes---continue →	Distance Structure is from Shoreline : _____ feet	Is your Property in Floodplain Zone? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue →	Distance Structure is from Shoreline : _____ feet		
<input checked="" type="checkbox"/> Non-Shoreland				

Value at Time of Completion * include donated time & material	Project	Project # of Stories	Project Foundation	Total # of bedrooms on property	What Type of Sewer/Sanitary System(s) Is on the property or Will be on the property?	Type of Water on property
\$70,000.	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Basement	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
	<input checked="" type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Foundation	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary Specify Type: <u>MOUND</u>	<input checked="" type="checkbox"/> Well
	<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Slab	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/>
	<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)	<input type="checkbox"/>
	<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/>	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> None	<input type="checkbox"/>

Existing Structure: (if addition, alteration or business is being applied for)	Length: 44' 1 1/2"	Width: 47'	Height: 10'
Proposed Construction: (overall dimensions)	Length: 22'	Width: 34'	Height: 10'

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/>	Principal Structure (first structure on property)	(X)	
	<input type="checkbox"/>	Residence (i.e. cabin, hunting shack, etc.)	(X)	
		with Loft	(X)	
		with a Porch	(X)	
		with (2nd) Porch	(X)	
		with a Deck	(X)	
<input type="checkbox"/> Commercial Use		with (2nd) Deck	(X)	
		with Attached Garage	(X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/>	Bunkhouse w/ (<input type="checkbox"/> sanitary, or <input type="checkbox"/> sleeping quarters, or <input type="checkbox"/> cooking & food prep facilities)	(X)	
	<input type="checkbox"/>	Mobile Home (manufactured date)	(X)	
	<input checked="" type="checkbox"/>	Addition/Alteration (explain) 22x34 ADDITION (SEE PLAN)	(22 X 34)	748
	<input type="checkbox"/>	Accessory Building (explain)	(X)	
	<input type="checkbox"/>	Accessory Building Addition/Alteration (explain)	(X)	
	<input type="checkbox"/>	Special Use: (explain)	(X)	
	<input type="checkbox"/>	Conditional Use: (explain)	(X)	
	<input type="checkbox"/>	Other: (explain)	(X)	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Neal M. & Leeann Frey
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date: 8.15.2022

Authorized Agent: _____ (See Note below)
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date: _____

Address to send permit: _____

Attach
Copy of Tax Statement

If you recently purchased the property send your Recorded Deed

Turn Over

In the box below: **Draw or Sketch your Property** (regardless of what you are applying for)

- (1) Show Location of:
(2) Show / Indicate:
(3) Show Location of (*):
(4) Show:
(5) Show:
(6) Show any (*):
(7) Show any (*):

Proposed Construction
North (N) on Plot Plan
(* Driveway and (*) Frontage Road (Name Frontage Road)
All Existing Structures on your Property
(* Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
(* Lake; (*) River; (*) Stream/Creek; or (*) Pond
(* Wetlands; or (*) Slopes over 20%

Fill Out in Ink – NO PENCIL

SEE ATTACHED

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements		Description	Setback Measurements
Setback from the Centerline of Platted Road	> 100	Feet	Setback from the Lake (ordinary high-water mark)	NA Feet
Setback from the Established Right-of-Way	> 100	Feet	Setback from the River, Stream, Creek	NA Feet
			Setback from the Bank or Bluff	NA Feet
Setback from the North Lot Line	> 100	Feet		
Setback from the South Lot Line	> 100	Feet	Setback from Wetland	NA Feet
Setback from the West Lot Line	> 100	Feet	20% Slope Area on the property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line		Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	75	Feet	Setback to Well	60 Feet
Setback to Drain Field	75	Feet		
Setback to Privy (Portable, Composting)	NA	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

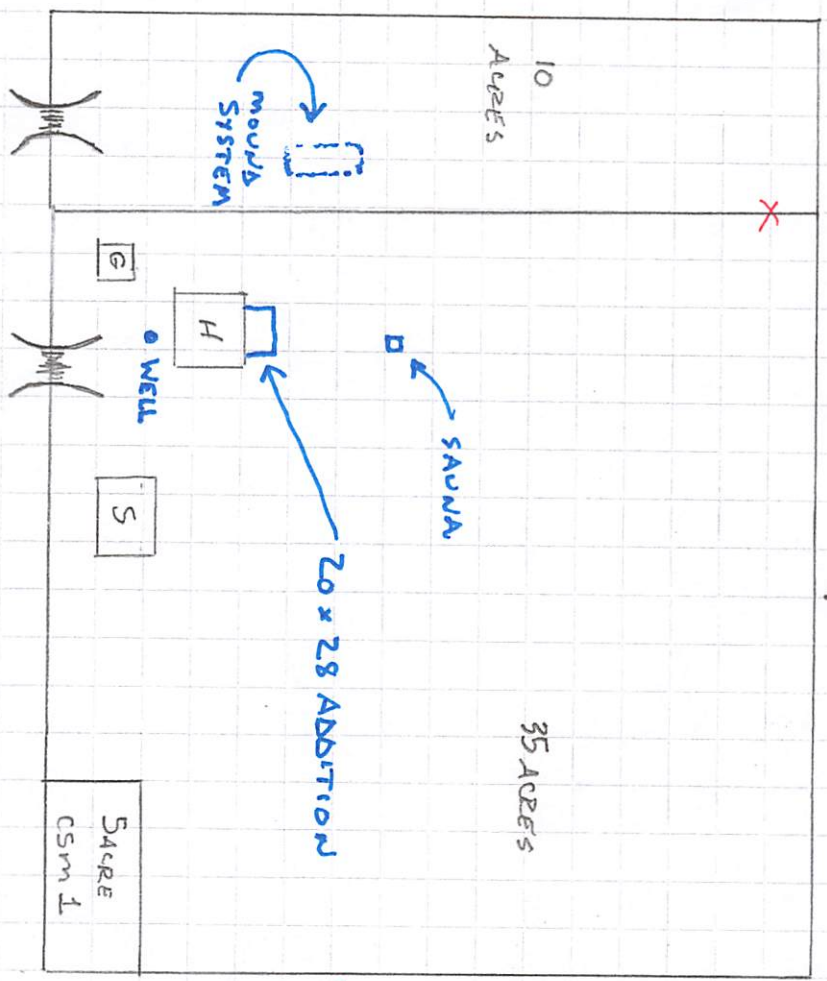
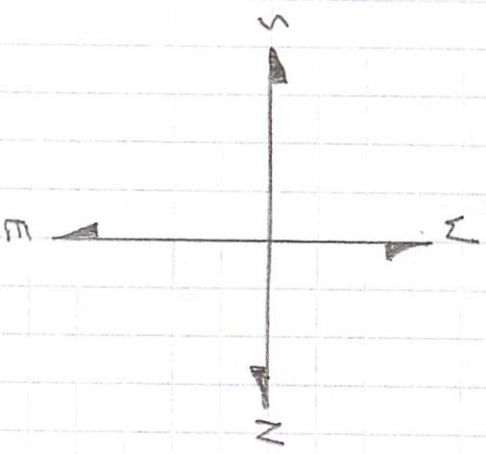
You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)		Sanitary Number: 22-255	# of bedrooms: 3	Sanitary Date: 5-11-2022
Permit Denied (Date):		Reason for Denial:		
Permit #: 22-0246		Permit Date: 9-14-22		
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Deed of Record)	<input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Fused/Contiguous Lot(s))	<input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> No
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> No
Inspection Record: original system still present. Digger coming at the end of the month (Sept. 2022)			Zoning District (Ag-1)	
			Lakes Classification ()	
Date of Inspection: 9-8-2022		Inspected by: gm		Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No - (If No they need to be attached.)				
To meet all setbacks, including eaves and overhangs. For personal residence only. Town/State DNR permits may be required. Must obtain a UPC permit from locally contracted UPC inspection agency prior to start of construction				
Signature of Inspector: Dina Muliman			Date of Approval: 9-9-2022	
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>

TAX ID # ~~37490~~

38822

TAX ID # ~~36417~~



w/ COVER
22' x 34'

- H - HOUSE
- G - GARAGE
- S - SHOP

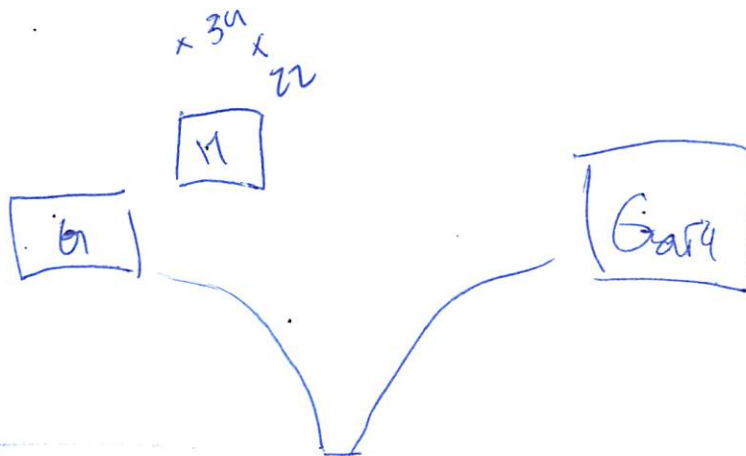
PERMIT TO CONSTRUCT MOULD SYSTEM
ISSUED 5/11/2022 (#04)-22-255

Field Investigation

Date: 9-8-22	Arrive: 13:20	Depart: 13:25
Landowner: Frey, Neal + LeeAnn	Photos taken: Yes	<input checked="" type="radio"/> No
Project Location: 7865 Washington Ave	Persons Present: H O	
Waterway:	Purpose of visit:	
PIN# _____ *Attach Real Estate Inquiry*	<input type="checkbox"/> ZP Onsite	<input type="checkbox"/> SAP
	<input type="checkbox"/> Sanitary	<input type="checkbox"/> Wetland Delineation
	<input type="checkbox"/> Floodplain	<input type="checkbox"/> OHWM
	<input type="checkbox"/> Boathouse	<input type="checkbox"/> Complaint
Paid \$ _____ Receipt # _____	<input type="checkbox"/> Averaging	<input type="checkbox"/> Walkout
	<input type="checkbox"/> Other: _____	

addition
22x34

septic moving
to field



Bayfield County, WI



9/9/2022, 1:33:33 PM

Wetlands ☐ Approximate Parcel Boundary ☐ Building Footprint 2015

Rivers ☐ Road Type ☐ Building

Town ☐

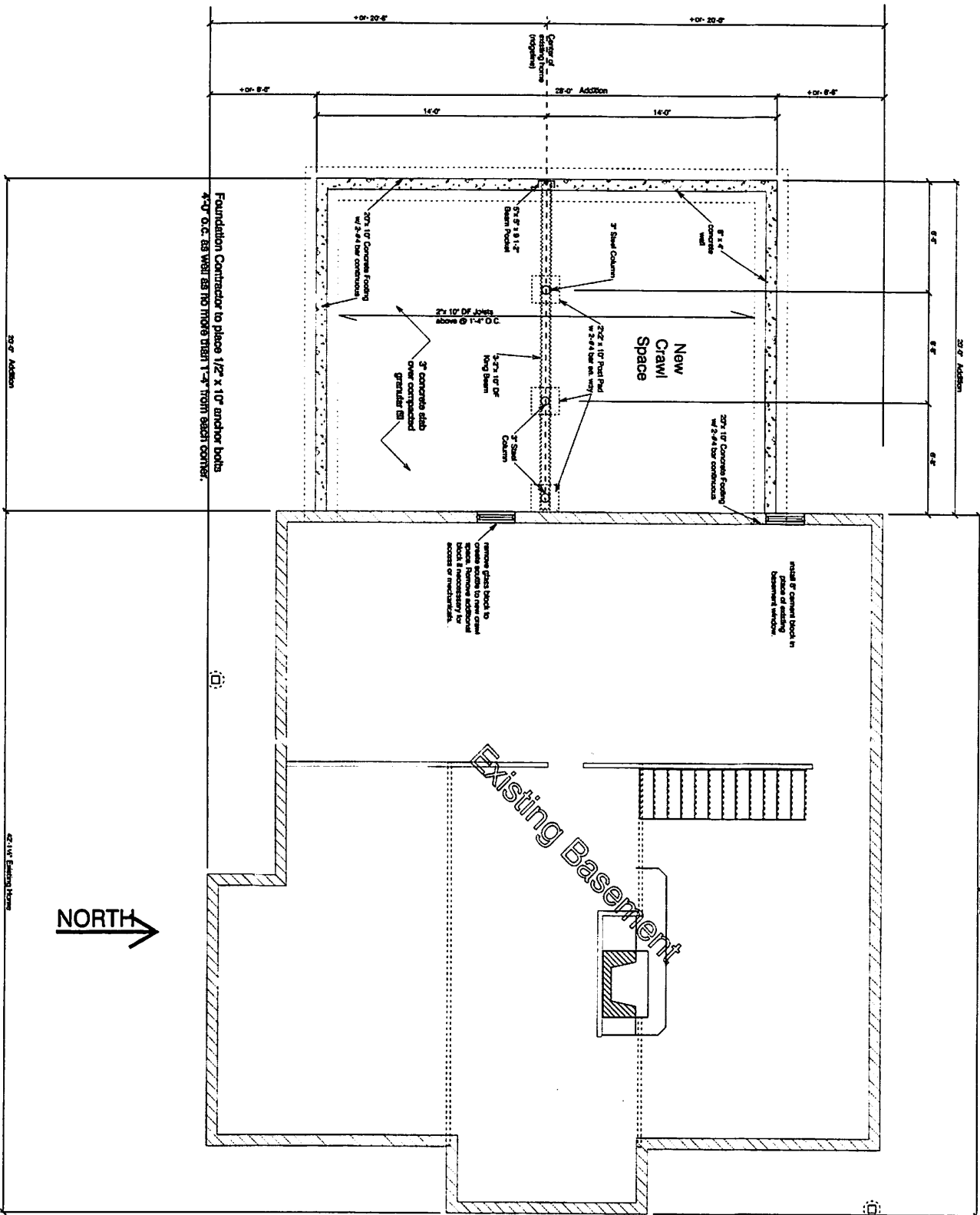
1:2,221

0 0.03 0.06 0.09 0.11 mi

0 0.04 0.09 0.17 km

Bayfield County Land Records Department

Foundation Contractor must comply with all standards set forth in ACI 318.05 as well as SPS Comm 321



Office
715-483-5019
www.ExtremeMeasuresPlans.com

DESIGNED: Submitted
DRAWN: WRE
APPROVED: WRE

Neal and LeeAnn
Frey Home Addition
78765 Washington Ave
Washburn, WI 54891

REVISIONS:
SCALE: 1/4" = 1'-0"
DRAWING NO. 22-05-938
DATE: 05-13-2022

Foundation

State Bar of Wisconsin Form 3-2003
QUIT CLAIM DEED

2022R-593888

DANIEL J. HEFFNER
BAYFIELD COUNTY, WI
REGISTER OF DEEDS
03/21/2022 09:15AM
TF EXEMPT #:
RECORDING FEE: 30.00
PAGES: 2

Document Number

Document Name

THIS DEED, made between NEAL M. FREY AND LEEANN FREY, HUSBAND AND WIFE, AS SURVIVORSHIP MARITAL PROPERTY ("Grantor," whether one or more), and NEAL M. FREY AND LEEANN FREY, HUSBAND AND WIFE, AS SURVIVORSHIP MARITAL PROPERTY ("Grantee," whether one or more).

Grantor quit claims to Grantee the following described real estate, together with the rents, profits, fixtures and other appurtenant interests, in BAYFIELD County, State of Wisconsin ("Property") (if more space is needed, please attach addendum):

See Attached.

Recording Area

Name and Return Address

NEAL FREY
78765 WASHINGTON AVE,
WASHBURN, WI 54891

The intent of this deed is to combine PIN 04.008.2.49.04.20.2 and 04.008.2.49.04.20.2 This transfer is exempt from fee and form as it is not defined as a conveyance under 77.21(1).
01.000.12000

Parcel Identification Number (PIN)
This 15 homestead property.
(is) (is-not)

Dated 3.18.2022

NEAL M. FREY (SEAL) LEEANN FREY (SEAL)

(SEAL) (SEAL)

AUTHENTICATION

Signature(s) _____
authenticated on _____
* _____
TITLE: MEMBER STATE BAR OF WISCONSIN
(If not, _____
authorized by Wis. Stat. § 706.06)

ACKNOWLEDGMENT

STATE OF WISCONSIN)
BAYFIELD COUNTY) ss.
Personally came before me on 3.18.2022
the above-named NEAL M. FREY
LEEANN FREY
to me known to be the person(s) who executed the foregoing
instrument and acknowledged the same.
* MATTHEW P CROWELL
Notary Public, State of Wisconsin Bayfield County
My Commission (is permanent) (expires: 6/2/2023)

THIS INSTRUMENT DRAFTED BY:
NEAL M. FREY

(Signatures may be authenticated or acknowledged. Both are not necessary.)

NOTE: THIS IS A STANDARD FORM. ANY MODIFICATIONS TO THIS FORM SHOULD BE CLEARLY IDENTIFIED.
QUIT CLAIM DEED © 2003 STATE BAR OF WISCONSIN

* Type name below signatures.

FORM NO. 3-2003

Document Number:

[illegible]

DEPT. OF JUSTICE

The intent of this form is to compare the
 and to determine if the two are the same.
 This is done by comparing the two
 and if it is not identical to the original
 it is not identical to the original.
 The intent of this form is to compare the
 and to determine if the two are the same.
 This is done by comparing the two
 and if it is not identical to the original
 it is not identical to the original.

[illegible][illegible]

NOTE: THIS INFORMATION IS FOR OFFICIAL USE ONLY. IT IS NOT TO BE RELEASED TO THE PUBLIC. IT IS THE PROPERTY OF THE U.S. GOVERNMENT AND IS LOANED TO YOUR AGENCY. IT AND ITS CONTENTS ARE NOT TO BE DISTRIBUTED OUTSIDE YOUR AGENCY. IT IS TO BE DESTROYED WHEN NO LONGER NEEDED. (When no longer needed, it should be destroyed in accordance with the instructions on the label.)

EXHIBIT "A"

THAT PART OF THE SOUTHEAST QUARTER OF THE NORTHWEST QUARTER (SE $\frac{1}{4}$ NW $\frac{1}{4}$), SECTION TWENTY (20), TOWNSHIP FORTY-NINE (49) NORTH, RANGE FOUR (4) WEST, TOWN OF BAYVIEW, BAYFIELD COUNTY, IN THE TOWN OF BAYVIEW, BAYFIELD COUNTY, WISCONSIN, DESCRIBED AS FOLLOWS:

TO LOCATE THE POINT OF BEGINNING, COMMENCE AT A 1-1/8" SQUARE IRON BAR AT THE N 1/4 CORNER OF SAID SECTION 20 AND RUN S 00°08'51" W, 1316.77 FEET ON THE N-S 1/4 LINE OF SAID SECTION 20 TO A GIN SPIKE AT THE CN 1/16 CORNER, WHICH IS THE POINT OF BEGINNING.

THENCE FROM SAID POINT OF BEGINNING BY METES AND BOUNDS:

CONTINUE ON SAID N-S 1/4 LINE, S 00°08'51" W, 333.21 FEET. THENCE LEAVING SAID N-S 1/4 LINE, N 89°09'26" W, 1307.41 FEET (PASSING THROUGH A 1" IRON PIPE AT 33.00 FEET) TO A 1" IRON PIPE ON THE WEST LINE OF SAID SE 1/4 OF THE NW 1/4. THENCE ON SAID WEST LINE, N 00°09'48" E, 333.21 FEET TO A 1" IRON PIPE AT THE NW CORNER OF SAID SE 1/4 OF THE NW 1/4. THENCE LEAVING SAID WEST LINE AND ON THE NORTH LINE OF SAID SE 1/4 OF THE NW 1/4, S 89°09'26" E, 1307.32 FEET (PASSING THROUGH A 1" IRON PIPE AT 1274.32 FEET) TO THE POINT OF BEGINNING.

TAX ID: 37490

PIN: 04.008.2.49.04.20.2 04.000.20000

The Northeast Quarter of the Northwest Quarter (NE $\frac{1}{4}$ NW $\frac{1}{4}$) of Section Twenty (20), Township Forty-nine (49) North, Range Four (4) West, Town of Bayview, Bayfield County, Wisconsin, LESS Lot 1 of Certified Survey Map No. 1786, as recorded in the Bayfield County Register of Deeds office on March 5, 2012, in Volume 10 of CSM's, on Pages 285-286, as Document No. 2012R-542689, located in the Town of Bayview, Bayfield County, Wisconsin.

HOUSE

TAX ID: 36417

PIN: 04.008.2.49.04.20.2 01.000.12000

TOWN OF BAYVIEW TREASURER
KELLY WARREN

PO BOX 67
WASHBURN, WI 54891

Phone: (715) 373-5567

STATE OF WISCONSIN - BAYFIELD COUNTY
REAL ESTATE PROPERTY TAX BILL FOR 2021

NEAL M & LEEANN FREY
TOWN OF BAYVIEW

PAYMENTS should reference: **Tax ID: 36417**

DOCUMENT RECORDING, or anything else should reference:

PIN: 04-008-2-49-04-20-2 01-000-12000

Alternate/Legacy ID:

Ownership: NEAL M & LEEANN FREY

NEAL M & LEEANN FREY
78765 WASHINGTON AVE
WASHBURN WI 54891

Important: Be sure this description covers your property. Note that this description is for tax bills only and may not be a full legal description. See reverse side for important information.

Property Description / Location of Property

Site Address: 78765 WASHINGTON AVE

Description: Sec 20 Tn 49 Rg 04 NE NW IN V.1001 P.227 LESS LOT 1
CSM #1786 IN V.10 P.285 IN V.1082 P.244 165

Please include self-addressed, stamped envelope for return receipt.
Please inform your treasurer of any billing address changes.

Acreage: 35.000

Document: 2012R-543709 1082-244

Assessed Value			Average Assessment Ratio	Net Assessed Value Rate (Does NOT reflect lottery or first dollar credit) 0.014446035	Real Estate Tax: First Dollar Credit: Lottery Credit: Net Real Estate Tax: Total Due:
Land	Improved	Total			
\$67,100	\$131,400	\$198,500	0.86939		2,867.54 -54.49 -193.24 2,619.81
Estimated Fair Market Value			An "X" means unpaid prior year taxes. <input type="checkbox"/>	School taxes reduced by school levy tax credit. \$354.05	Total Due: For full payment pay to TOWN OF BAYVIEW treasurer by January 31, 2022
Land	Improved	Total			
\$77,200	\$151,100	\$228,300			
Estimated State Aids					
Allocated Tax District			Net Tax		% Tax Change
Taxing Jurisdiction	2020	2021	2020	2021	
COUNTY	32,642	34,723	928.30	923.29	-0.5
TOWN OF BAYVIEW	189,983	193,678	567.57	566.32	-0.2
SCHL-WASHBURN	994,983	1,035,312	1,351.86	1,304.65	-3.5
TECHNICAL COLLEGE	67,804	71,216	81.58	73.28	-10.2
Totals	1,285,412	1,334,929	2,929.31	2,867.54	-2.1
First Dollar Credit			56.89	54.49	-4.2
Lottery & Gaming Credit			139.43	193.24	38.6
Net Property Tax			2,732.99	2,619.81	-4.1

Warning If not paid by due dates,
installment option is lost and total tax is
delinquent and subject to interest and if
applicable, penalty. (See reverse)

TOWN OF BAYVIEW
1511 WILSON AVE
BAYVIEW, ONTARIO M2H 3G5

STATE OF MICHIGAN - BARRETT COUNTY
DEAR STATE PROPERTY TAX BILL FOR 2022

TOWN OF BAYVIEW - BARRETT COUNTY
1511 WILSON AVE

PAYMENTS: \$1,000.00
DOCUMENT RECORDING: \$100.00
INTEREST: \$100.00
TOTAL: \$1,200.00

PHONE: (716) 371-2222
FAX: (716) 371-2222

PROPERTY INFORMATION: 1511 WILSON AVE
BAYVIEW, ONTARIO M2H 3G5
TAX MAP: 1511 WILSON AVE

1511 WILSON AVE
BAYVIEW, ONTARIO M2H 3G5

TAXING JURISDICTION		TAXES		TOTAL	
TOWN OF BAYVIEW	1.0000	1.0000	1.0000	1.0000	1.0000
BARRETT COUNTY	1.0000	1.0000	1.0000	1.0000	1.0000
STATE OF MICHIGAN	1.0000	1.0000	1.0000	1.0000	1.0000
TOTAL	3.0000	3.0000	3.0000	3.0000	3.0000
TAXES		TAXES		TOTAL	
Property Tax	1.0000	1.0000	1.0000	1.0000	1.0000
Document Recording	1.0000	1.0000	1.0000	1.0000	1.0000
Interest	1.0000	1.0000	1.0000	1.0000	1.0000
TOTAL	3.0000	3.0000	3.0000	3.0000	3.0000
TAXES		TAXES		TOTAL	
Property Tax	1.0000	1.0000	1.0000	1.0000	1.0000
Document Recording	1.0000	1.0000	1.0000	1.0000	1.0000
Interest	1.0000	1.0000	1.0000	1.0000	1.0000
TOTAL	3.0000	3.0000	3.0000	3.0000	3.0000

TOWN OF BAYVIEW TREASURER

KELLY WARREN

PO BOX 67

WASHBURN, WI 54891

Phone: (715) 373-5567

**STATE OF WISCONSIN - BAYFIELD COUNTY
REAL ESTATE PROPERTY TAX BILL FOR 2021**NEAL M & LEEANN FREY
TOWN OF BAYVIEW**PAYMENTS** should reference: **Tax ID: 37490****DOCUMENT RECORDING**, or anything else should reference:**PTN:** 04-008-2-49-04-20-2 04-000-20000**Alternate/Legacy ID:****Ownership:** NEAL M & LEEANN FREY**Important:** Be sure this description covers your property. Note that this description is for tax bills only and may not be a full legal description. See reverse side for important information.**Property Description / Location of Property****Site Address:** N/A**Description:** Sec 20 Tn 49 Rg 04 PAR IN SE NW DESC IN DOC 2019R-579078**NEAL M & LEEANN FREY**
78765 WASHINGTON AVE
WASHBURN WI 54891Please include self-addressed, stamped envelope for return receipt.
Please inform your treasurer of any billing address changes.**Acreage:** 10.000**Document:** 2019R-579078

Assessed Value			Average Assessment Ratio	Net Assessed Value		
<u>Land</u>	<u>Improved</u>	<u>Total</u>		<u>Rate</u>		
\$2,500	\$0	\$2,500	0.86939	(Does NOT reflect lottery or first dollar credit) 0.014446035		Real Estate Tax: 36.11
Estimated Fair Market Value			An "X" means unpaid prior year taxes. <input type="checkbox"/>	School taxes reduced by school levy tax credit. \$4.46		First Dollar Credit: -0.00
<u>Land</u>	<u>Improved</u>	<u>Total</u>				Lottery Credit: -0.00
See Reverse (Use Value Assessment)						Net Real Estate Tax: 36.11
Estimated State Aids						Total Due: 36.11
Allocated Tax District						For full payment pay to TOWN OF BAYVIEW treasurer by January 31, 2022
Taxing Jurisdiction	2020	2021	2020	2021	% Tax Change	
COUNTY	32,642	34,723	10.76	11.63	8.1	Warning If not paid by due dates, installment option is lost and total tax is delinquent and subject to interest and if applicable, penalty. (See reverse)
TOWN OF BAYVIEW	189,983	193,678	6.58	7.13	8.4	
SCHL-WASHBURN	994,983	1,035,312	15.66	16.43	4.9	
TECHNICAL COLLEGE	67,804	71,216	0.95	0.92	-3.2	
Totals	1,285,412	1,334,929	33.95	36.11	6.4	
First Dollar Credit			0.00	0.00	0.0	
Lottery & Gaming Credit			0.00	0.00	0.0	
Net Property Tax			33.95	36.11	6.4	

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Real Estate Bayfield County Property Listing

Today's Date: 9/9/2022

Property Status: **Next Year**

Created On: 8/17/2022 10:52:11 AM

Description	Updated: 8/17/2022
Tax ID:	38822
PIN:	04-008-2-49-04-20-2 01-000-13000
Legacy PIN:	
Map ID:	
Municipality:	(008) TOWN OF BAYVIEW
STR:	S20 T49N R04W
Description:	NE NW IN V.1001 P.227 LESS LOT 1 CSM #1786 IN V.10 P.285 IN DEED V.1082 P.244 TOG WITH PAR IN SE NW DESC IN DOC 2019R-579078
Recorded Acres:	0.000
Calculated Acres:	43.680
Lottery Claims:	1
First Dollar:	No
Zoning:	(AG-1) Agricultural-1
ESN:	106


Tax Districts	Updated: 8/17/2022
1	STATE
04	COUNTY
008	TOWN OF BAYVIEW
046027	SCHL-WASHBURN
001700	TECHNICAL COLLEGE

Recorded Documents	Updated: 10/11/2012
QUIT CLAIM DEED	
Date Recorded: 3/21/2022	2022R-593888
WARRANTY DEED	
Date Recorded: 9/13/2019	2019R-579078
WARRANTY DEED	
Date Recorded: 10/11/2016	2016R-565640
TRUSTEES DEED	
Date Recorded: 5/7/2012	2012R-543709 1082-244
CERTIFIED SURVEY MAP	
Date Recorded: 3/5/2012	2012R-542689 10-285

Ownership	Updated: 8/17/2022
NEAL M & LEEANN FREY	WASHBURN WI

Billing Address:	Mailing Address:
NEAL M & LEEANN FREY	NEAL M & LEEANN FREY
78765 WASHINGTON AVE	78765 WASHINGTON AVE
WASHBURN WI 54891	WASHBURN WI 54891

Site Address	* indicates Private Road
78765 WASHINGTON AVE	WASHBURN 54891



Property Assessment

Updated: N/A

2022 Assessment Detail			
Code	Acres	Land	Imp.
N/A			
2-Year Comparison	2021	2022	Change
Land:	0	0	0.0%
Improved:	0	0	0.0%
Total:	0	0	0.0%

Property History	Tax ID
Parent Properties	
04-008-2-49-04-20-2 01-000-12000	36417
04-008-2-49-04-20-2 04-000-20000	37490

HISTORY [Expand All History](#) White=Current Parcels Pink=Retired Parcels

- Tax ID:** 6517 **Pin:** 04-008-2-49-04-20-2 04-000-10000 **Leg. Pin:** 008102304000
- Tax ID:** 37490 **Pin:** 04-008-2-49-04-20-2 04-000-20000
- Tax ID:** 6514 **Pin:** 04-008-2-49-04-20-2 01-000-10000 **Leg. Pin:** 008102301000
- Tax ID:** 36417 **Pin:** 04-008-2-49-04-20-2 01-000-12000

 38822 This Parcel  Parents  Children

Town, City, Village, State or Federal
Permits May Also Be Required

LAND USE – **X**
SANITARY – **# 22-25S**
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **22-0246** Issued To: **Neal & Leeann Frey**

Location: **NE** ¼ of **NW** ¼ Section **20** Township **49** N. Range **4** W. Town of **Bayview**

In V. 1001 P. 227 less Lot 1 CSM #1786 in V. 10 P. 285 in Deed V. 1082 P. 244 tog with par in SE NW Desc in Doc 2019R-579078

Gov't Lot	Lot	Block	Subdivision	CSM#
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Residential Structure in Ag-1 zoning district

For: **Add/Alt: [1-Story], Residential Addition (2-bedrooms, Bathroom, Laundry with Crawl Space (22' x 34')
= 748 sq. ft. Height of 10'**

Condition(s): **Meet and Maintain Setbacks as approved including eaves and overhangs. For Personal Residence Only. Town/State/DNR permits may be required. A Uniform Dwelling Code (UDC) Permit from the locally contracted UDC Inspection Agency must be obtained prior to the start of construction.**

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Erica Meulemans, AZA

Authorized Issuing Official

September 14, 2022

Date